

ALCOHOL AND OTHER DRUG ABUSE BLOCK GRANT REPORT OF EXPENDITURES

The total amount reported must agree with county expenditures reported on CARS 570 reports. The target group total amount reported must agree with alcohol abuse as well as drug abuse totals recorded by the county on the Alcohol and Other Drug Abuse Block Grant Report of Expenditures tabulated from provider agencies within the county program operations.

EXPENSE REPORTING BY TARGET GROUP AND STANDARD PROGRAM CLUSTER

	<u>ALCOHOL AND / OR DRUG ABUSE</u>	<u>PREVENTION</u>	<u>WOMEN'S TREATMENT</u>
100	\$ _____	\$ _____	\$ _____
200	\$ _____	\$ _____	\$ _____
300	\$ _____	\$ _____	\$ _____
400	\$ _____	\$ _____	\$ _____
500	\$ _____	\$ _____	\$ _____
600	\$ _____	\$ _____	\$ _____
700	\$ _____	\$ _____	\$ _____
800	\$ _____	\$ _____	\$ _____
Total	\$ _____	\$ _____	\$ _____

Counties may tabulate provider agency information first, followed by the county total for all providers that receive block grant funds, which will summarize county compliance with earmarked service areas. Expenses reported by the target group and standard program cluster will provide the Department with information necessary to compile the activities report for the federal government.

ACTION STATEMENT: The annual report for the period January - December 2002 is due March 21, 2003.

REGIONAL OFFICE CONTACT: Area Administrators

CENTRAL OFFICE CONTACT: Valerie Payne
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COUNTY TOTAL

ALCOHOL AND OTHER DRUG ABUSE BLOCK GRANT REPORT OF EXPENDITURES

JANUARY - DECEMBER 2002

Name - County	Name - Contact Person
Address - Contact Person (Street, City, State, Zip Code)	Telephone Number - Contact Person

ALCOHOL AND / OR DRUG TREATMENT

Alcohol and / or Drug Treatment \$ _____ Must be at least 70% of total allocated funds.

PRIMARY PREVENTION STRATEGIES

Total Primary Prevention \$ _____ Must be at least 20% of total funds. These funds are already included within the alcohol and / or drug funds identified above.

Community -Based Process	\$ _____
Education	\$ _____
Information Dissemination	\$ _____
Alternatives	\$ _____
Environmental	\$ _____
Problem Identification and Referral	\$ _____

TREATMENT SERVICES TO PREGNANT WOMEN - WOMEN WITH DEPENDENT CHILDREN

\$ _____ Must be at least 10% of total funds. These funds are already included within the alcohol and / or drug funds identified above.

THE COUNTY TOTAL IS THE COMPOSITE OF ALL PROVIDER AGENCY REPORTS OF AODA BLOCK GRANT EXPENDITURES. THE COUNTY TOTAL MUST AGREE WITH COUNTY EXPENDITURES REPORTED ON CARS 570 REPORTS. PROVIDER AGENCY FORM'S MUST BE ATTACHED.

PROVIDER AGENCY

ALCOHOL AND OTHER DRUG ABUSE BLOCK GRANT REPORT OF EXPENDITURES

Indicate if this report details the following specific AODA Block Grant expenditures.

- | | |
|--|--|
| <input type="checkbox"/> AODA Juvenile Justice | <input type="checkbox"/> Inner City Services |
| <input type="checkbox"/> Treatment Alternative Program | <input type="checkbox"/> Service to Persons in Treatment |
| <input type="checkbox"/> IV Drug | <input type="checkbox"/> Urban / Rural Women's AODA |
| <input type="checkbox"/> Women's AODA Treatment | |

JANUARY - DECEMBER 2002

Name - Provider Agency	Agency ID
Name - Contact Person	Telephone Number - Contact Person

ALCOHOL AND / OR DRUG TREATMENT

Alcohol and / or Drug Treatment \$ _____

PRIMARY PREVENTION STRATEGIES

Total Primary Prevention	\$ _____	
Community -Based Process	\$ _____	
Education	\$ _____	
Information Dissemination	\$ _____	
Alternatives	\$ _____	
Environmental	\$ _____	
Problem Identification and Referral	\$ _____	

TREATMENT SERVICES TO PREGNANT WOMEN - WOMEN WITH DEPENDENT CHILDREN

\$ _____

THESE TOTALS ARE THE PROVIDER AGENCY AODA BLOCK GRANT FUNDS EXPENDED BY EACH MARKED SERVICE AREA. THE SUM OF ALL PROVIDER AGENCY REPORT OF EXPENDITURES MUST AGREE WITH THE COUNTY TOTAL. THE COUNTY TOTAL MUST AGREE WITH COUNTY EXPENDITURES REPORTED ON CARS 570 REPORTS.

OUTCOMES FOR SUBSTANCE ABUSE SERVICES

ALCOHOL AND OTHER DRUG ABUSE BLOCK GRANT REPORT OF EXPENDITURES

1. Listing of outcomes submitted in response to last year's memo series and any revisions.

EXAMPLES:

- a. Proportion of clients completing the recommended course of treatment
- b. Proportion of clients, confirmed by counselor, reporting reduced alcohol / drug use at discharge

2. Findings for calendar year 2002.

EXAMPLES:

Proportion of clients completing the recommended course of treatment:

It was our goal to achieve a level of at least 60 percent on this outcome for 2002. We achieved a rate of 62 percent.

Proportion of clients, confirmed by counselor, reporting reduced alcohol / drug use at discharge:

We did not set a goal for this outcome; however, we achieved rates of 72 percent and 68 percent respectively for 2000 and 2001. Our goal for next year will be to reach a level of at least 70 percent.

3. How was the information used?

EXAMPLES:

The outcomes are part of our county's quality improvement plan. The information was shared with agency staff, administration, and community AODA advisory committee and was used as a basis for improving our outpatient service.

4. (If applicable) Describe primary prevention activities for each strategy as indicated on provider and county total reports that utilize block grant funds.

EXAMPLE:

Information Dissemination: The Boys and Girls Club distributed parenting tip brochures and "Mr. Yuk" stickers to parents and educators at school orientation during National Inhalants and Poisons Awareness Week.

DESCRIPTION OF PREVENTION STRATEGIES

1. Information Dissemination

This strategy provides awareness and knowledge of the nature and extent of the identified problem which may include alcohol, tobacco and drug use, abuse and addiction, violence, teen pregnancy, hunger, child abuse and neglect and their effects on individuals, families and communities. It also provides knowledge and awareness of available prevention programs and services. Information dissemination is characterized by one-way communication from the source to the audience, with limited contact between the two. Examples of activities conducted and methods used for this strategy include (but are not limited to) the following:

- a. Clearinghouse / information resource center(s);
- b. Resource directories;
- c. Media campaigns;
- d. Brochures;
- e. Radio / television public service announcements;
- f. Speaking engagements;
- g. Health fairs / health promotion; and
- h. Information lines.

2. Education

This strategy involves two-way communication and is distinguished from the Information Dissemination strategy by the fact that interaction between the educator / facilitator and the participants is the basis of its activities. Activities under this strategy aim to affect critical life and social skills, including decision-making, refusal skills, critical analysis (e.g., of media messages) and systematic judgment abilities. Examples of activities conducted and methods used for this strategy include (but are not limited to) the following:

- a. Classroom and / or small group sessions (all ages);
- b. Parenting and family management classes;
- c. Peer leader / helper programs;
- d. Education programs for youth groups; and
- e. Children of substance abusers groups.

3. Alternatives / Healthy Activities

This strategy provides for the participation of the general population or the target population in activities that exclude alcohol, tobacco and other drug use, and / or promotes healthy activities that lend themselves to the building of resiliency among youth and families. The assumption is that constructive and healthy activities offset the attraction to, or otherwise meet the needs usually filled by alcohol, tobacco and other drugs and would, therefore, minimize or obviate resort to the latter. Alternative activities or healthy activities also provide a means to character building and may promote healthy relationships between youth and adults in that participants may internalize the values and attitudes of the programs and individuals involved in establishing the program objectives. Examples of activities conducted and methods used for this strategy include (but are not limited to) the following:

- a. Drug free dances and parties;
- b. Youth / adult leadership activities;
- c. After school activities such as participation in music lessons, art clubs, school newspaper, etc.;
- d. Community drop-in centers; and
- e. Community service activities.

4. Problem Identification and Referral

This strategy aims at identification of those who have demonstrated at-risk behavior such as indulging in illegal / age-inappropriate use of tobacco or alcohol and those individuals who have indulged in the first use of illicit drugs in order to assess if their behavior can be reversed through education. It should be noted, however, that this strategy does not include any activity designed to determine if a person is in need of treatment. Examples of activities conducted and methods used for this strategy include (but are not limited to) the following:

- a. Employee assistance programs;
- b. Student assistance programs; and
- c. Driving while under the influence / driving while intoxicated education programs.

5. Environmental / Social Policy Change Strategies

This strategy establishes or changes written and unwritten community standards, codes and attitudes, thereby influencing incidence and prevalence of at-risk behaviors in the general population. This strategy is divided into two sub-categories to permit distinction between activities which center on legal and regulatory initiatives and those which relate to the service and action-oriented initiatives. Examples of activities conducted and methods used for this strategy shall include (but are not limited to) the following:

- a. Promoting the establishment and review of alcohol, tobacco and drug use policies in schools;
- b. Technical assistance to communities to maximize local enforcement procedures governing availability and distribution of alcohol, tobacco and other drug use;
- c. Modifying alcohol and tobacco advertising practices;
- d. Local enforcement procedures to limit violent behavior; and
- e. Establishing local policies which create opportunities for you to become involved in their communities.

6. Community-Based Process / Community Involvement and Responsibility

This strategy aims to enhance the ability of the community to more effectively provide prevention, remediation, and treatment services for behaviors which lead to deep end services. Activities in this strategy include organizing, planning, enhancing efficiency and effectiveness of service implementation, inter-agency collaboration, coalition building and networking. Examples of activities conducted and methods used for this strategy include (but are not limited to) the following:

- a. Community and volunteer training: e.g., neighborhood action training, training of key people in the system, staff / officials training;
- b. Systematic planning;
- c. Multi-agency coordination and collaboration;
- d. Accessing services and funding; and
- e. Community organizing and team-building.